



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : **Confirmation No. 5757**
Mikio ODA : Atty Docket No. 2000_1888A
Serial No. 09/743,578 : Group Art Unit 2654
Filed January 12, 2001 : Examiner Talivaldis I. Smits

PITCH NORMALIZATION DEVICE FOR
VOICE RECOGNITION OF INPUT VOICE :

RECEIVED

JUL 31 2003

PATENT OFFICE FEE TRANSMITTAL FORM

Technology Center 2600

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

THE COMMISSIONER IS AUTHORIZED
TO CHARGE ANY DEFICIENCY IN THE
FEES FOR THIS PAPER TO DEPOSIT
ACCOUNT NO. 23-0975

Sir:

Attached hereto is a check in the amount of \$84.00 to cover Patent Office fees relating to filing the following attached papers:

Additional Claims Fee Transmittal Letter
Independent \$84.00

A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.

Respectfully submitted,

Mikio ODA

By David M. Ovedovitz
David M. Ovedovitz
Registration No. 45,336
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July 29, 2003

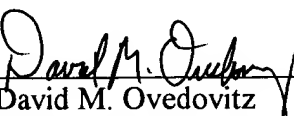
[Check No. 56896]

2000_1888A

- [] Please charge Deposit Account No. 23-0975 the amount of \$ to cover additional fee. The Commissioner is authorized to charge any deficiency associated with this communication or to credit any overpayment to the Deposit Account. The original and two copies of this document are enclosed.

Respectfully submitted,

Mikio ODA

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ADDITIONAL CLAIMS FEE TRANSMITTAL LETTER

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FEES FOR THIS PAPER TO DEPOSIT
ACCOUNT NO. 23-0975

Sir:

Transmitted herewith is an Amendment in the above-identified application. Additional fees required as a result of this Amendment are calculated as follows:

	SMALL ENTITY		LARGE ENTITY
Total Claims exceeding 20 (not already paid for): x	(\$ 9 = \$)	or	(\$18 = \$)
Indep. Claims exceeding 3 (not already paid for): 1 x	(\$42 = \$)	or	(\$84 = \$84.00)
<input type="checkbox"/> Multiple Dep. Claim(s) (if there previously were none): +	(\$140 = \$)	or	(\$280 = \$)
Total Additional Fee =	<u>\$</u>	or	<u>\$84.00</u>

☐ Small entity status of this application is established by the verified statement under 37 C.F.R. 1.9 and 1.27 which

☐ is enclosed or

☐ has been previously submitted.

☒ A check in the amount of \$84.00 is enclosed.